



\$ 7824
Bhw

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Kazunori SAKURAI et al.

Group Art Unit: 2824

Application No.: 09/843,924

Examiner: B. Owens

Filed: April 30, 2001

Docket No.: 109182

For: METHOD FOR FORMING BUMP, SEMICONDUCTOR DEVICE AND METHOD
FOR MAKING THE SAME, CIRCUIT BOARD, AND ELECTRONIC DEVICE

AMENDMENT UNDER 37 C.F.R. §1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In reply to the April 27, 2004 Office Action, please consider the following:

Amendments to the Specification;

Amendments to the Claims as reflected in the listing of claims; and

Remarks.

07/13/2004 WABRHAM1 00000033 09843924

01 FC:1201

516.00 OP

**PATENT APPLICATION**

OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400
Facsimile: (703) 836-2787

Attorney Docket No.: 109182

AMENDMENT TRANSMITTAL

In re the Application of

Kazunori SAKURAI et al.

Group Art Unit: 2824

Application No.: 09/843,924

Examiner: Beth E. Owens

Filed: April 30, 2001

For: METHOD FOR FORMING BUMP, SEMICONDUCTOR DEVICE AND METHOD FOR MAKING THE SAME, CIRCUIT BOARD, AND ELECTRONIC DEVICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.
☐ Small entity status of this application has been established.

The filing fee has been calculated as shown below:

(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA						
TOTAL CLAIMS	*27 MINUS	**32	=0	RATE	ADD'L FEE			RATE	ADD'L FEE
INDÉP CLAIMS	*10 MINUS	***4	=6	x 9	\$			x 18	\$
				x 43	\$			x 86	\$ 516
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 145	\$			+290	\$
					\$				\$ 516.00

* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Check No. 155925 in the amount of \$516.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff
Registration No. 27,075

Tarik M. Nabi
Registration No. 55,478